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APPLICANTS

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\*\* CONTINUING DATA \*\*\*\*\* *HP*

\*\* FOREIGN APPLICATIONS \*\*\*\*\* *HP*  
 GERMANY 202 19 246.6 12/12/2002

IF REQUIRED, FOREIGN FILING LICENSE GRANTED \*\* SMALL ENTITY \*\*  
 \*\* 03/25/2004

Foreign Priority claimed 35 USC 119 (a-d) conditions met	<input checked="" type="checkbox"/> yes <input type="checkbox"/> no <input checked="" type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance	STATE OR COUNTRY GERMANY	SHEETS DRAWING 3	TOTAL CLAIMS 12	INDEPENDENT CLAIMS 1
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Verified and Acknowledged

Examiner's Signature *HP* Initials

ADDRESS

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TITLE

Hand-operated tool with handle

FILING FEE RECEIVED	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue )
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